



COCONINO COUNTY
HEALTH DEPARTMENT

ENVIRONMENTAL QUALITY

Barbara Worgess
Director
Robert Maglievaz
Manager

**AFFIDAVIT OF AGREEMENT TO ENCROACH INTO THE
PROPERTY LINE SETBACK**

I, _____, owner of record of AP # _____
and legal description Section _____, Township _____,
and Range _____, agree to the wastewater disposal system or its replacement
serving AP # _____ and legal description Section _____,
Township _____, and Range being placed in such a manner as to encroach
within the 50 feet setback from property lines as required by the Arizona Department of Environmental
Quality. I understand that my agreement to this encroachment may limit my ability to install a water
well on my property since I will be required by the Arizona Department of Water Resources to
maintain a minimum of 100 feet between the well and all sewage disposal systems. Should I sell this
property, I agree to inform the purchaser in writing of this information.

I have read this affidavit and do understand its meaning and the impact on the potential development
of my property.

Signature: _____ Date: _____

Names of Property Owners: _____

Address of Property Owners: _____

This instrument was acknowledged before me this

_____ Day of _____, 20 _____

My commission expires: _____

Notary Public